

STATE OF WASHINGTON DEPARTMENT OF ECOLOGY

7

COMPUTER INPUT APPLICATION

PERMIT CERTIFICATE

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SKAMANIA 29	SURFACE WATER	GROUND	WATER				
NAME				TELEPHONE NO.			
Carson Hot Mineral Springs	. Inc.			(509) 427-8292			
ADDRESS	(CITY)		(STATE)	(ZIP CODE) 9			
MP 1 St. Martins Road Pol	Box 1169 Carson		WA	98610 40 14			
ASSIGNED TO			TELEPHONE NO.	DATE ASSIGNED			
1000000	/CITY		(STATE)	(ZIP CODE)			
ADDRESS	(CITY)		(STATE)	(ZIP CODE)			
APPLICATION NO. 6 227239	PERMIT NO.		CERTIFICATION	10.			
DATE AMENDED	DATE CANCELLED		W.R.I.A.	29 Received, 1			
	ADD	PLICATION		E Start UP			
DATE APPLICATION RECEIVED	INITIAL \$10.00 FEE REC		DATE FEE RECEIV	ED 1			
11-30-87	YES	□ NO	17-30				
STATEMENT OF ADDITIONAL	DATE SENT		DATE RECEIVED				
EXAMINATION FEE &	37772 02177		57112 112021712				
DATE RETURNED FOR COMPLETION OR CORR	ECTION	DATE RECEIVED					
	TEMPO	ORARY PERMIT					
APPROVED BY			DATE ISSUED	DATE ISSUED			
		JBLICATION					
APPROVED BY	DATE APPROVED		DATE NOTICE SEN				
/			December 1	December 16, 1987			
DATE AFFIDAVIT RECEIVED CHECKER	D BY TIME EXPIRED DATE AN	MENDED NOTICE SEN	T DATE AFFIDAVIT	RECEIVED TIME EXPIRED			
) = / = 00	DEPARTMENT OF GA	ME AND FISHERI	ES REPORT				
APPROVED	PROVISO	WIL AND FIGHT	PROTEST				
			2				
	EXA	MINATION					
DATE EXAMINATION MADE 1/19/86 SB/8/14/92 Durc	1-1 11 11 -11	PORT OF EXAM. WRIT	TEN WRITTEN BY	CHECKED BY			
DATE PERMIT FEE REQUESTED 5 126 193	AMOUNT DUE	O	DATE RECEIVED	19194			
	Р	ERMIT					
PERMIT APPROVED BY DATE AF	2/2/19U	PERMIT NO.		4/20/94			
		OF CONSTRUCT		,			
DATE NOTICE SENT	DATE FILED		EXTENSION FEE				
EXTENDED TO		EXTENDED TO					
	WELL DRILLER'S AND	O/OR CONSTRUCT	TION REPORT				
DATE SENT		DATE FILED	HOW HE ON				
On SU	Name and Address of the Owner, which the Publisher of the Owner, which the Owner, where the Owner, which the Owner, where the Owner, which the	05 001:25:	1081				
DATE NOTICE/SENT/		OF CONSTRUCT	EXTENSION FEE				
4/20/94	DATE FILED		EXTENSION FEE				
EXTENDED TO		EXTENDED TO					
	PROOF O	F APPROPRIATION	V				
DATE SENT DATE FIL		EXTENSION FEE		ENDED TO			
DATE CERTIFICATE FEE REQUESTED AMOUNT	DUE DATE REC	CEIVED	DATE APPROVED FOR CER	TIFICATE APPROVED BY			
	CERT	TFICATION					
PROOF EXAM, REQUIRED	CERTIFICATE NUMBER		DATE ISSUED				
YES NO							
REMARKS							